

**CALIFORNIA BOARD OF REGISTERED NURSING
APPLICATION FEE SCHEDULE
FOR**

By Endorsement

The following appropriate **TOTAL FEE** submitted with your application(s) and fingerprint card(s) must be made **payable to the Board of Registered Nursing** by check or money order (U.S. currency). **The fee is an earned fee** for evaluation of your application(s) and processing of the fingerprint cards and **IS NOT refundable**. The portion of the fee for processing the fingerprint card(s) is subject to change without notice by the California Department of Justice or the Federal Bureau of Investigation.

APPLICATION FOR LICENSURE BY **ENDORSEMENT ONLY**

Application For Licensure	\$50.00
Two Fingerprint Cards	<u>\$56.00</u>
Total Fee Payable to the Board of Registered Nursing	\$106.00

APPLICATION FOR LICENSURE BY **ENDORSEMENT AND TEMPORARY LICENSE**

Application For Licensure	\$50.00
Two Fingerprint Cards	\$56.00
Application For Temporary License	<u>\$30.00</u>
Total Fee Payable to the Board of Registered Nursing	\$136.00

APPLICATION FOR LICENSURE AS A REGISTERED NURSE

By Endorsement

I. INTRODUCTION

To qualify for endorsement into California, an applicant must hold a current and active license in another state or Canada, have completed an educational program meeting all California requirements, and have passed the national licensure examination or acceptable five-part Canadian examination. The Canadian Comprehensive Examination is not acceptable. If you do not possess these qualifications, you must apply for licensure by examination. Please contact the Board at (916) 322-3350 to request an application for examination.

It is advisable for endorsement applicants to apply for a temporary license in order to be able to begin working while awaiting fingerprint results and permanent licensure. Please allow four weeks for processing a temporary license.

PLEASE NOTE THE FOLLOWING IMPORTANT ISSUES:

- Processing times may vary, depending on timeliness of receipt of documents from schools, agencies, and other states or countries. Please be aware that processing of an application indicating a prior conviction(s) may take longer than other applications.
- If you change your name and/or address after submitting an application for licensure, you must notify the board immediately to ensure that you receive important notices.
- Pending application files are not public record, therefore an applicant must sign a release of information form before the Board will release information to the public, including employers, relatives, or other third parties.
- Once you are licensed, your address of record must be disclosed to the public upon request under California law.
- Applicant fees are earned; therefore, fees are not refundable even if an applicant is found ineligible.

II. REPORTING PRIOR CONVICTIONS OR DISCIPLINE AGAINST LICENSES

Applicants are required under law to report all misdemeanor and felony convictions. "Driving under the influence" convictions must be reported. Convictions must be reported even if they have been expunged under Penal Code Section 1203.4 or even if a court ordered diversion program has been completed under the Penal Code or under Article 5 of the Vehicle Code. Also, all disciplinary action against an applicant's registered nurse, practical nurse, vocational nurse or other professional license must be reported.

Failure to report prior convictions or disciplinary action is considered falsification of application and is grounds for denial of licensure or revocation of license.

II. REPORTING PRIOR CONVICTION OR DISCIPLINE AGAINST LICENSES (cont'd)

When reporting prior convictions or disciplinary action, **the applicant is required to provide a full written explanation of:** circumstances surrounding the arrest(s), conviction(s), and/or disciplinary action(s); the date of incident(s), conviction(s) or disciplinary action(s); specific violation(s) (cite section of law if convicted), court location or jurisdiction, sanctions or penalties imposed and completion dates. Certified copies of court documents or state board determinations/decisions should also be included.

Note: A certified copy of the arrest report may also be requested. The applicant must also submit a description of the rehabilitative changes in their lifestyle which would enable them to avoid future occurrences.

To make a determination in these cases, the Board considers the nature and severity of the offense, additional subsequent acts, recency of acts or crimes, compliance with court sanctions, and evidence of rehabilitation.

The burden of proof lies with the applicant to demonstrate acceptable documented evidence of rehabilitation. Examples of rehabilitation evidence include, but are not be limited to:

- Recent, dated letter from applicant describing rehabilitative efforts or changes in life to prevent future problems.
- Letters of reference on official letterhead from employers, nursing instructors, health professionals, professional counselors, parole or probation officers, or other individuals in positions of authority who are knowledgeable about your rehabilitation efforts.
- Letters from recognized recovery programs and/or counselors attesting to current sobriety and length of time of sobriety, if there is a history of alcohol or drug abuse.
- Proof of community work, schooling, self-improvement efforts.
- Court-issued certificate of rehabilitation or evidence of expungement, proof of compliance with criminal probation or parole, and orders of the court.

All of the above items should be mailed **directly** to the Board by the individual(s) or agency who is providing information about the applicant. Have these items sent to the Board of Registered Nursing, Licensing Unit, P.O. Box 944210, Sacramento, CA 94244-2100.

It is the responsibility of the applicant to provide sufficient rehabilitation evidence on a timely basis so that a licensing determination can be made.

An applicant is also required to immediately report, in writing, to the Board any conviction(s) or disciplinary action(s) which occur between the date the application was filed and the date that a California registered nursing license is issued. Failure to report this information is grounds for denial of licensure or revocation of license.

NOTE: The application must be completed and signed by the applicant under the penalty of perjury.

III. INSTRUCTIONS FOR SUBMITTING FINGERPRINT CARDS

GENERAL INFORMATION

All applicants for licensure by endorsement are required to complete and submit two fingerprint cards and a fee with their application forms. The fingerprint cards must be submitted in the same name as shown on the application. The Board of Registered Nursing will submit the fingerprint cards to the California Department of Justice and the Federal Bureau of Investigation for processing. Fingerprint fees are established by these agencies (see Application Fee Schedule).

HOW TO COMPLETE FINGERPRINT CARDS

Applicants must complete all items that are marked by a black "x" on both sides of the card. To facilitate prompt and accurate processing of the fingerprint card by both agencies, **TYPE** or print legibly in **BLACK INK** all requested information on each card. If any color other than black is used, the card will be rejected and another card will have to be completed and submitted. The name must be identical to that submitted on the application. Use the abbreviations listed below for the physical description items.

- SEX - Female = F Male = M
- Height (HGT.) - Express in feet and inches. Do not use fractions of an inch; round off to the nearest inch. DO NOT USE THE METRIC SYSTEM. Example: 5'9".
- Weight (WGT) - Express in pounds. Do not use fractions of a pound; round off to the nearest pound. DO NOT USE THE METRIC SYSTEM. Example: 139 lbs.
- Color of EYES -

Black	BLK	Gray	GRY
Blue	BLU	Green	GRN
Brown	BRN	Hazel	HZL
- Color of HAIR -

Bald	BAL	Gray	GRY
Black	BLK	Red or Auburn	RED
Blonde	BLN	Sandy	SDY
Brown	BRN	White	WHI

Each applicant MUST have his or her fingerprints imprinted only in **BLACK INK** on each fingerprint card. Fingerprints should be taken at a local law enforcement agency. There may be a fee for this service. We are advised that you should call first as to a convenient time.

DO NOT FOLD FINGERPRINT CARDS. Use a 9" X 12" envelope to return your completed application and fingerprint cards with fees. Write "DO NOT FOLD" on the envelope. If your cards are folded, you will need to complete and submit new fingerprint card(s). **THIS WILL CAUSE A DELAY IN DETERMINING YOUR ELIGIBILITY FOR LICENSURE.**

FINGERPRINT PROCESSING FEE

The fingerprint processing fee is in addition to the application fee. This fee is **not refundable** and is subject to change by the DOJ and FBI without notice. Section 11105(e) of the Penal Code authorizes the Board to collect a fee sufficient to recover the expense of conducting background checks.

III. **INSTRUCTIONS FOR SUBMITTING FINGERPRINT CARDS (Cont'd)**

The appropriate fingerprint processing fee is **payable to the Board of Registered Nursing** by check or money order in US currency. The application fee and fingerprint fee may be combined and submitted to the Board with one check or money order in US currency.

PROCESSING TIME

Fingerprint processing times for applications may vary. Applications indicating conviction(s) may take longer than other applications. Delays may also occur if the fingerprint cards are returned by the DOJ/FBI because they are incomplete, folded or if the fingerprints are not legible.

There must be a clearance of the fingerprinting requirement before a permanent registered nurse license will be issued to endorsement applicants.

FINGERPRINTING AUTHORITY

Section 144(b) of the Business and Professions Code authorizes the Board to require an applicant for licensure to furnish a full set of fingerprints for purposes of conducting criminal history record checks. Further, Section 480(a)(1) of the Business and Professions Code authorizes the Board of Registered Nursing to deny licensure based on convictions of crimes substantially related to the practice of nursing. Fingerprints are required in order for the DOJ/FBI to conduct background checks for criminal convictions.

IV. **COMPLETING CONFIRMATION CARD**

The Board will acknowledge receipt of an application if the applicant fills in his or her name and address and affixes the proper postage to the CONFIRMATION CARD. This card is being provided as an optional service to all applicants.

V. **SOCIAL SECURITY NUMBER**

Disclosure of your social security number is mandatory. Section 30 of the Business and Professions Code and Public Law 94-455 (42 USCA 405 (c)(2)(C)) authorize collection of your social security number. Your social security number will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for family support in accordance with Section 11350.6 of the Welfare and Institutions Code, or for verification of licensure or examination status by a licensing or examination entity which utilizes a national examination where licensure is reciprocal with the requesting state. **If you fail to list your social security number, your application for initial or renewal license will not be processed.** You will also be reported to the Franchise Tax Board, which may assess a \$100 penalty against you. Questions regarding the Franchise Tax Board should be directed to either (800) 852-7050 or (800) 852-5711; Out-of-country (916) 854-6500.

VI. **BOARD'S ADDRESS**

The Board's mailing address is:

Board of Registered Nursing
P.O. Box 944210
Sacramento, CA 94244-2100

If you wish to deliver your application in person or by overnight mail, the Board's street address is:

Board of Registered Nursing
400 R Street, Suite 4030
Sacramento, CA 95814-6200

VII. GENERAL INFORMATION ON LICENSURE BY ENDORSEMENT

Endorsement is the licensure method for registered nurses who have previously been licensed in another state in the United States and for some Canadian registered nurse licensees. To qualify for licensure by endorsement, you must meet **all** of the following requirements:

1. Completion of the nursing program in an accredited school of professional nursing which meets **all** of California's educational requirements. **If you are deficient in any requirement, you must make up the deficiency prior to becoming licensed.**
2. Passage of the National Council Licensure Examination (NCLEX) or the State Board Test Pool Examination (SBTPE) for Registered Nurses in the United States, or the five-part licensing examination in Canada. **The Canadian Comprehensive Examination is not acceptable.** An English comprehension examination is required if you did not take the Canadian examination in English. Either the Test of English as a Foreign Language (TOEFL), the Test of Written English, or the English portion of Commission on Graduates of Foreign Nursing Schools (CGFNS) is acceptable for English competency. CGFNS is located at 3600 Market Street, Suite 400, Philadelphia, PA 19104-2651; phone number (215) 349-8767. TOEFL is located at Box 6151, Princeton, NJ 08541-6151; phone number (609) 951-1100.

International graduates who have not passed one of the acceptable licensing examinations are not eligible for licensure by endorsement and should contact the Board at (916) 322-3350 to request an application for licensure by examination.

3. Possession of a current and active license from another state in the United States or from Canada. (If you do not have a current license in the other state, it must be updated prior to California licensure.)

VIII. APPLICATION FOR LICENSE

Applicants must submit the following items:

1. Completed **blue** application forms and **two fingerprint** cards with the **total fee** (US currency). Complete the fingerprint cards as directed in the INSTRUCTIONS FOR SUBMITTING FINGERPRINT CARDS.

The fee is an earned fee for evaluation of your application and processing of the fingerprint cards. **The fee IS NOT refundable.** To submit the appropriate nonrefundable total fee, please refer to the document titled, "APPLICATION FEE SCHEDULE."

2. One recent 2" x 2" passport-type photograph.
3. **Pink Verification of License** form completed and forwarded by the Board of Nursing of the state or Canada where the current and active license is held. (Further details in Section X.)
4. **Yellow Request for Transcript** form(s) completed and forwarded from the nursing school(s) with certified transcript(s). (Further details in Section XI.)
5. Documents and/or letters explaining prior conviction(s) or disciplinary action and attesting to your rehabilitation as directed in Section II, REPORTING PRIOR CONVICTIONS OR DISCIPLINE AGAINST LICENSES, if applicable.

IX. VERIFICATION OF LICENSE

Mail the VERIFICATION OF LICENSE form to the state board from which you are submitting proof of clear, current and active RN licensure. Be sure to include the processing fee that is required by that state.

If educated outside the USA, a VERIFICATION OF LICENSE form must also be sent to the board where the examination was taken. Be sure to include any necessary fee required by that state.

No telephone verifications will be made. Official license verification must be received in writing from the other state board before a temporary or permanent license can be issued by this board.

X. REQUEST FOR TRANSCRIPT

Mail the REQUEST FOR TRANSCRIPT form to your nursing school(s) with the fee required by the school. (Transcripts **are not accepted** from applicants or if stamped “issued to student.”) **The transcripts must include all completed course work and reflect the degree awarded and date conferred.**

Transcripts from non-California graduates are required from all colleges you attended that reflect courses required for a degree in nursing, including general education course requirements and all nursing courses.

XI. TEMPORARY LICENSE

The Board may issue a temporary license to practice nursing for a period of six months, allowing an applicant to work pending issuance of a permanent license. Since fingerprint results and school transcripts can often take some time to reach the Board for evaluation, the Board strongly recommends applying for a temporary license to allow you to begin to work pending permanent licensure.

To qualify for a temporary license, the endorsement applicant must submit:

- ✓ Completed **Blue Application for Licensure By Endorsement.**
- ✓ Two completed fingerprint cards.
- ✓ Completed **Blue Application for Temporary License.**
- ✓ Appropriate nonrefundable **total fee** as directed in the Application Fee Schedule.
- ✓ **Pink Verification Of License** form from the other state(s) or Canada which must be received by the Board as proof of a clear, active, and current RN license.

The issuance of a temporary license is normally completed within four weeks, but may be delayed if the application indicates a prior conviction(s).

If you have not received notification of permanent licensure approximately four weeks prior to the expiration of your temporary license, contact the Board at (916) 322-3350 for instructions on how to apply for a second temporary license.

XII. ADVANCED PRACTITIONERS/PUBLIC HEALTH NURSES

In order to use the title or hold yourself out as a nurse practitioner, psychiatric/mental health nurse, nurse midwife, nurse anesthetist, clinical nurse specialist or public health nurse, California law requires registered nurses to be certified by the Board. If you wish to practice in one of these areas, please request the applicable additional application for certification.

XIII. NURSING PRACTICE ACT

It is the applicant's responsibility to keep current on the laws pertaining to the practice of registered nursing, as these laws are subject to change. California laws pertaining to the practice of registered nursing can be requested by contacting:

**Publications Section
California Department of General Services
P.O. Box 1015
North Highlands, CA 95660
(916) 574-2200
Cost: \$9.95**